

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101246

Entity Name: BOIA USA, INC.

FILED
Apr 24, 2004
Secretary of State

Current Principal Place of Business:

2645 EXECUTIVE PARK DR., SUITE 161
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

2645 EXECUTIVE PARK DR., SUITE 161
WESTON, FL 33331

New Mailing Address:

FEI Number: 43-1975485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHN, JEFFREY B ESQ.
3300 UNIVERSITY DRIVE
SUITE 711
CORAL SPRINGS, FL 33065

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MITSICOSTA, JORGE
Address: 1325 PORTOFINO CIR., #807
City-St-Zip: WESTON, FL 33326

Title: V () Delete
Name: IMAZI, ROSA D
Address: 1325 PORTOFINO CIR., #807
City-St-Zip: WESTON, FL 33326

Title: S () Delete
Name: IGNOZI, ROSA D
Address: 1325 PORTOFINO CIR., #807
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: MITSICOSTA, CATHERINE
Address: 1325 PORTOFINO CIR., #807
City-St-Zip: WESTON, FL 33326

Title: AS () Delete
Name: KAHN, JEFFREY B
Address: 3300 UNIVERSITY DR. SUITE 711
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MITSICOSTA, JORGE
Address: 4706 SW 160 AVE APT.133
City-St-Zip: MIRAMAR, FL 33027

Title: V (X) Change () Addition
Name: D'IGNAZI, ROSA M
Address: 4706 SW 160 AVE APT. 133
City-St-Zip: MIRAMAR, FL 33027

Title: S (X) Change () Addition
Name: D'IGNAZI, ROSA M
Address: 4706 SW 160 AVE APT. 133
City-St-Zip: MIRAMAR, FL 33027

Title: T (X) Change () Addition
Name: MITSICOSTA, CATHERINE
Address: 4706 SW 160 AVE APT. 133
City-St-Zip: MIRAMAR, FL 33027

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSA D'IGNAZI

V

04/24/2004

Electronic Signature of Signing Officer or Director

Date